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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS		
Case number (if known)	Chapter you are filing under:	
	☐ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	■ Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself			
		About Debtor 1:	Α	about Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name			
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture	Debra First name A Middle name		irst name
	identification to your meeting with the trustee.	Podzimek Last name and Suffix (Sr., Jr., II, III)	La	ast name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years	Debra Brown		
	Include your married or maiden names.			
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-3711		

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Debtor 1 Debra A Podzimek

		About Debtor 1:		About Debtor 2 (Spouse Only in a Joint Case):
1.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years	■ I have not used any business name or EINs.		☐ I have not used any business name or EINs.
	Include trade names and doing business as names	Business name(s)	-	Business name(s)
		EINs	-	EINs
5.	Where you live	703 Cambridge Lane		If Debtor 2 lives at a different address:
		Shorewood, IL 60404 Number, Street, City, State & ZIP Code	-	Number, Street, City, State & ZIP Code
		Will		
		County	-	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.		If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	-	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for	Check one:		Check one:
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.		Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

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Case number (if known) Debtor 1 Debra A Podzimek

ar	t 2: Tell the Court About	Your E	Bankruptcy Ca	se					
7.	The chapter of the Bankruptcy Code you are				n of each, see <i>Notice</i> of page 1 and check t		11 U.S.C. § 342(b) for Individuals Filing for Bankru e box.	ptcy	
	choosing to file under	☐ Chapter 7							
			Chapter 11						
			Chapter 12						
			Chapter 13						
3.	How you will pay the fee	•	about how yo	u may pay. Ty attorney is sub	pically, if you are pay	ing the fee yo	k with the clerk's office in your local court for more urself, you may pay with cash, cashier's check, or alf, your attorney may pay with a credit card or che	money	
					stallments. If you cho		n, sign and attach the Application for Individuals to	Pay	
			I request that but is not req	t my fee be w uired to, waive	aived (You may requ your fee, and may de	est this option o so only if yo	n only if you are filing for Chapter 7. By law, a judge ur income is less than 150% of the official poverty installments). If you choose this option, you must	line that	
							ial Form 103B) and file it with your petition.		
Э.	Have you filed for bankruptcy within the	■ N	0.						
	last 8 years?	ПΥ	es.						
			District		Whe		Case number		
			District		Whe		Case number		
			District		Whe	en	Case number		
10.	Are any bankruptcy cases pending or being	■ N	0						
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	ΠY	es.						
			Debtor				Relationship to you		
			District		Whe	en	Case number, if known		
			Debtor				Relationship to you		
			District		Whe	en	Case number, if known		
11.	Do you rent your residence?	■ N	o. Go to I	ine 12.					
		ΠY	es. Has yo	ur landlord obt	ained an eviction jud	gment agains	t you and do you want to stay in your residence?		
				No. Go to line	12.				
				Yes. Fill out II bankruptcy pe		t an Eviction 、	Judgment Against You (Form 101A) and file it with	this	

Debtor 1	Debra A Podzimek	Document	Page 4 of 57	Case number (if known)	

Par	Report About Any Bu	sinesses	You Own	as a Sole Proprie	tor	
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.		
		☐ Yes.	Name	and location of bus	siness	
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name	of business, if any		
	If you have more than one sole proprietorship, use a		Numb	er, Street, City, Sta	te & ZIP Code	
	separate sheet and attach it to this petition.		Check	k the appropriate bo	ox to describe your business:	
	•				ness (as defined in 11 U.S.C. § 101(27A))	
				Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))	
				Stockbroker (as d	defined in 11 U.S.C. § 101(53A))	
				Commodity Broke	er (as defined in 11 U.S.C. § 101(6))	
				None of the above	e	
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadlines operation	ou are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate addines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of erations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedur 1 U.S.C. 1116(1)(B).			
	For a definition of small	■ No.	I am r	ot filing under Chap	pter 11.	
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am fi Code.		11, but I am NOT a small business debtor according to the definition in the Bankruptcy	
		☐ Yes.	I am f	ling under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code	٠.
Par	t 4: Report if You Own or	Have Any	Hazardo	us Property or An	by Property That Needs Immediate Attention	
14.	Do you own or have any	■ No.				
	property that poses or is alleged to pose a threat of imminent and	☐ Yes.	What is	the hazard?		
	identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?			iate attention is why is it needed?		
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	the property?	Number, Street, City, State & Zip Code	

Document Debtor 1 **Debra A Podzimek**

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

15. Tell the court whether you have received a briefing about credit counseling.

> The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1: You must check one:

I received a briefing from an approved credit

counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor	2	(Spouse	Only	in	а	Joint	Case
---------------------	---	---------	------	----	---	-------	------

You must check one:

Case number (if known)

I received a briefing from an approved credit
counseling agency within the 180 days before I filed
this bankruptcy petition, and I received a certificate of
completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

> I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Document Page 6 of 57 Case number (if known) Debtor 1 **Debra A Podzimek** Part 6: **Answer These Questions for Reporting Purposes** 16. What kind of debts do 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." you have? ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ☐ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses ☐ Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses □ No are paid that funds will □ Yes be available for distribution to unsecured creditors? 18. How many Creditors do 1-49 **1**,000-5,000 **1** 25,001-50,000 you estimate that you **5001-10,000 5**0,001-100,000 **50-99** owe? **1**0,001-25,000 ☐ More than 100,000 **1**00-199 **200-999** 19. How much do you **\$0 - \$50,000** □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your assets to □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500.001 - \$1 million 20. How much do you □ \$0 - \$50,000 □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your liabilities □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion to be? **\$100,001 - \$500,000** □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million Sign Below Part 7: For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11. United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Debra A Podzimek Signature of Debtor 2 **Debra A Podzimek** Signature of Debtor 1

Executed on

MM / DD / YYYY

Executed on August 29, 2017

MM / DD / YYYY

Debtor 1 Debra A Podzimek Document Page 7 of 57

Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Patrick	A. Meszaros	Date	August 29, 2017
Signature of	Attorney for Debtor		MM / DD / YYYY
Patrick A.	Meszaros		
Printed name			
Law Office	e of Patrick Meszaros		
Firm name			
1100 W. Je	efferson		
Joliet, IL 6	0435		
Number, Street,	City, State & ZIP Code		
Contact phone	815-722-4001	Email address	patrickmeszaros@yahoo.com
6239538			
Bar number & S	tate		

		Docume	ent Page 8 of 57	
Fill in this infor	mation to identify your	case:		
Debtor 1	Debra A Podzime	k		
	First Name	Middle Name	Last Name	
Debtor 2				
Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
if known)				☐ Check if this is an
				amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

		Your a	assets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	330,000.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	24,626.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	354,626.00
Pa	t 2: Summarize Your Liabilities		
			iabilities nt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	274,087.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	2,300.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	148,398.51
	Your total liabilities	\$	424,785.51
Pa	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	5,469.56
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	5,219.56
Pa	Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ır other so	hedules.
	■ Yes What kind of debt do you have?		

Official Form 106Sum

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

the court with your other schedules.

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Case number (if known) Debtor 1 Debra A Podzimek

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 8,801.13 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total c	laim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	2,300.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	2,300.00

				Doc	ument	Page 10 of 57			
Fill	in this inform	nation to identi	fy your case and th	nis filing	g:				
Deb	tor 1	Debra A P							
Doh	tor 2	First Name	Middle	e Name		Last Name			
	use, if filing)	First Name	Middle	e Name		Last Name			
Unit	ed States Bar	nkruptcy Court f	or the: NORTHER	N DIST	RICT OF ILLI	INOIS			
Cas	e number								Charle if this is an
Cas						_			☐ Check if this is an amended filing
Of	ficial For	rm 106A/	B						
_		_	Property						12/15
				an asset	only once. If	an asset fits in more than on	e category, list	the asset in	
think	it fits best. Be	as complete an	d accurate as possib	le. If two	married peop	le are filing together, both are	e equally respo	nsible for su	pplying correct
	er every quest		•			. ,	,		,
Part	1: Describe E	Each Residence,	Building, Land, or Of	her Real	Estate You O	wn or Have an Interest In			
1. D o	you own or h	ave any legal or	equitable interest in a	any resid	ence, building	g, land, or similar property?			
П	No. Go to Part	. 2							
_	Yes. Where is								
	res. where is	the property?							
1.1				What	is the proper	ty? Check all that apply			
	703 Cambridge Lane			_	■ Single-family home			ct secured cla	aims or exemptions. Put
	Street address, if	f available, or other of	ble, or other description		Duplex or mu	ulti-unit building	the amount of any secured claims Creditors Who Have Claims Secu		d claims on <i>Schedule D:</i>
				Condominium or		n or cooperative	Oreanors W	no nave olali	ns decarea by 1 roperty.
					Manufacture	d or mobile home			
	Shorewoo	d IL	60404-0000		Land		Current value entire proper		Current value of the portion you own?
	City	State	e ZIP Code		Investment p	roperty	\$33	0,000.00	\$330,000.00
									our ownership interest
				_		st in the property? Check one	a life estate		ancy by the entireties, or
					Debtor 1 only		Fee Simp	ole	
	Will				Debtor 2 only				
	County					Debtor 2 only			munity property
						of the debtors and another you wish to add about this ite	see inst em. such as loc	,	
					erty identificat		,		
2	Add the dolla	ar value of the	portion you own fo	or all of	vour entries	from Part 1, including an	v entries for		
						g and		:> <u> </u>	\$330,000.00
Part	2: Describe Y	Your Vehicles							
.						h . di di		-11	- L'ala a como de at
						whether they are register Executory Contracts and Ur			eriicies you own that
3. C	ars, vans, tru	icks, tractors	sport utility vehicle	s. moto	rcvcles				
		,	opon anny vonion	.5,	,				
	No								
	Yes								

Del	btor 1	Debra A Podzim	Documei ek	nt	Page 1	L1 of 57 Case r	number (if known)	
		aft, aircraft, motor h	omes, ATVs and other recreationars, personal watercraft, fishing vess					
_	_		3	,		,,		
	No No							
L] Yes							
			portion you own for all of your end r Part 2. Write that number here					\$0.00
Par	t 3: Des	scribe Your Personal a	nd Household Items					
Do	you ow	n or have any legal	or equitable interest in any of the	follo	owing items	•		Current value of the portion you own? Do not deduct secured claims or exemptions.
[<i>Example</i> □ No □	, ,,	shings furniture, linens, china, kitchenware	;				
ı	Yes.	Describe						
		Fu	rniture					\$2,250.00
ı	No	es: Televisions and ra	dios; audio, video, stereo, and digita les, cameras, media players, games		uipment; com	puters, printers, s	canners; music o	collections; electronic devices
ļ	Example ■ No		ines; paintings, prints, or other artwo nemorabilia, collectibles	ork; t	oooks, picture	s, or other art obje	ects; stamp, coin	, or baseball card collections;
ļ	Example No	ent for sports and he es: Sports, photograp musical instrumer Describe	nic, exercise, and other hobby equip	omen	nt; bicycles, po	ool tables, golf clu	bs, skis; canoes	and kayaks; carpentry tools;
ı	■ No		otguns, ammunition, and related equ	uipme	ent			
I	□ No É		, furs, leather coats, designer wear,	, sho	es, accessori	es		
		Cle	othing					\$545.00
I	□ No É	les: Everyday jewelry Describe	, costume jewelry, engagement ring	gs, we	edding rings,	heirloom jewelry, '	watches, gems,	
		Mi	sc. Jewelry					\$1.500.00

Official Form 106A/B Schedule A/B: Property page 2

Debtor 1	Debra A Podzimek	Document	Page 12 of	Case number (if known)	
	arm animals				
Exam ■ No	ples: Dogs, cats, birds, horses				
	Describe				
14. Any o	ther personal and household item	s you did not already list,	including any heal	th aids you did not list	
	Give specific information				
	the dollar value of all of your entri			es you have attached	\$4,295.00
Part 4: De	escribe Your Financial Assets				
Do you o	wn or have any legal or equitable i	nterest in any of the follo	wing?		Current value of the portion you own? Do not deduct secured claims or exemptions.
☐ No	ples: Money you have in your wallet,			nd when you file your petiti	on
— 163.					
				Cash	\$31.00
□ No ■ Yes.	institutions. If you have multiple	e accounts with the same in Institution			
	Checki	ing Account			
	17.1. Joint	Chase C	hecking Accoun	<u>t</u>	\$300.00
Exam ■ No	s, mutual funds, or publicly traded ples: Bond funds, investment account		oney market account	s	
19. Non-p	ublicly traded stock and interests venture	in incorporated and unine	corporated busines	ses, including an interes	t in an LLC, partnership, and
□ No	. Give specific information about the	m			
— 165.	Name of enti			% of ownership:	
	Sun Tans of business of tanning business of tanning business of tanning business of the substantial business of th	Enterprises IncDBA a operates out of two loc owns 14 tanning beds in storage, office 6, \$0 inventory, \$0 accors, Business has 3 chec	cations. The n operation and equipment and unts		

Official Form 106A/B Schedule A/B: Property page 3

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Case number (if known) Document

Debtor 1 **Debra A Podzimek**

> **Elegant Carpet Cleaning & Water Restoration** LLC with 3 members. Debtor owns 1/3 of LLC. LLC does not own any Real Estate, no vehicles, Business owns 1 dehumidifier and 5 air handlers, 1 Bank account with \$7,000. Total LLC assets equal\$8,000. Business has accounts payable of approximately \$5000 for a net value of \$3,000.

\$1,000.00 33%

20.	Negotiable instrume	ents include personal checks, ca	gotiable and non-negotiable instruments ashiers' checks, promissory notes, and money ord ransfer to someone by signing or delivering them.	
	■ No	•	, , ,	
		information about them		
	— 100. 01/0 opcomo	Issuer name:		
	Retirement or pens Examples: Interests ☐ No		403(b), thrift savings accounts, or other pension	or profit-sharing plans
	Yes. List each acc	count separately.		
		Type of account:	Institution name:	
		Dobtos	Doth IDA	¢10,000,00
		Debtor	Roth IRA	\$19,000.00
		used deposits you have made s	so that you may continue service or use from a co t, public utilities (electric, gas, water), telecommur	
	☐ Yes		Institution name or individual:	
	•	ct for a periodic payment of mor	ney to you, either for life or for a number of years))
	No			
	☐ Yes	Issuer name and description.		
		eation IRA, in an account in a 1), 529A(b), and 529(b)(1).	qualified ABLE program, or under a qualified	state tuition program.
	☐ Yes	Institution name and description	on. Separately file the records of any interests.11	U.S.C. § 521(c):
	Trusts, equitable o	r future interests in property (other than anything listed in line 1), and right	s or powers exercisable for your benefit
	☐ Yes. Give specific	c information about them		
			and other intellectual property eds from royalties and licensing agreements	
	☐ Yes. Give specific	c information about them		
		es, and other general intangib permits, exclusive licenses, coo	oles operative association holdings, liquor licenses, pro	ofessional licenses
	☐ Yes. Give specific	c information about them		
Мс	oney or property ow	ed to you?		Current value of the portion you own? Do not deduct secured claims or exemptions.

Official Form 106A/B Schedule A/B: Property page 4

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Case number (if known) Document Debtor 1 **Debra A Podzimek** 28. Tax refunds owed to you ■ No ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years...... 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ☐ Yes. Give specific information..... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ■ No $\hfill \square$ Yes. Give specific information.. 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance No ☐ Yes. Name the insurance company of each policy and list its value. Company name: Beneficiary: Surrender or refund value: 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. ■ No ☐ Yes. Give specific information.. 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue ■ No ☐ Yes. Describe each claim....... 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims ■ No ☐ Yes. Describe each claim....... 35. Any financial assets you did not already list No ☐ Yes. Give specific information.. 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached \$20,331.00 for Part 4. Write that number here..... Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. ☐ Yes. Go to line 38. Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?

Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above

■ No. Go to Part 7.□ Yes. Go to line 47.

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Case number (if known) Debtor 1 **Debra A Podzimek** 53. Do you have other property of any kind you did not already list?

Examples: Season tickets, country club membership

☐ Yes. Give specific information.......

54. Add the dollar value of all of your entries from Part 7. Write that number here

\$0.00

Part	8: List the Totals of Each Part of this Form Part 1: Total real estate, line 2			\$330,000.00
	Part 2: Total vehicles, line 5	\$0.00		ψοσο,σσο.σσ
57.	Part 3: Total personal and household items, line 15	\$4,295.00		
58.	Part 4: Total financial assets, line 36	\$20,331.00		
59.	Part 5: Total business-related property, line 45	\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7: Total other property not listed, line 54 +	\$0.00		
62.	Total personal property. Add lines 56 through 61	\$24,626.00	Copy personal property total	\$24,626.00
63.	Total of all property on Schedule A/B. Add line 55 + line 62			\$354,626.00

Official Form 106A/B Schedule A/B: Property page 6

		17(7(3)111)		
Fill in this infor	rmation to identify your	case:		
Debtor 1	Debra A Podzime	ek		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Specific laws that allow exemption

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Schedule A/B that lists this property	portion you own			Specific laws that allow exemption	
	Copy the value from Check only one box for each exemption. Schedule A/B				
703 Cambridge Lane Shorewood, IL 60404 Will County	\$330,000.00		\$15,000.00	735 ILCS 5/12-901	
Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit		
Furniture Line from Schedule A/B: 6.1	\$2,250.00		\$2,250.00	735 ILCS 5/12-1001(b)	
Ellie IIIII Schedule AVD. 0.1			100% of fair market value, up to any applicable statutory limit		
Misc. Jewelry Line from Schedule A/B: 12.1	\$1,500.00		\$450.00	735 ILCS 5/12-1001(b)	
Line nom schedule AVD. 12.1			100% of fair market value, up to any applicable statutory limit		
Checking Account Joint: Chase Checking Account	\$300.00		\$300.00	735 ILCS 5/12-1001(b)	
Line from Schedule A/B: 17.1			100% of fair market value, up to any applicable statutory limit		

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Debtor 1 Debra A Podzimek Debtor 1 Debra A Podzimek

	Brief description of the property and line on Schedule A/B that lists this property	Current value of the Amount of the exemption you clai portion you own			Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
	Elegant Carpet Cleaning & Water Restoration LLC with 3 members.	\$1,000.00		\$1,000.00	735 ILCS 5/12-1001(b)
	Debtor owns 1/3 of LLC. LLC does not own any Real Estate, no vehicles, Business owns 1 dehumidifier and 5 air handlers, 1 Bank account with \$7,000. Total LLC assets equal\$8,000. Business h Line from Schedule A/B: 19.2			100% of fair market value, up to any applicable statutory limit	
	Debtor: Roth IRA	\$19,000.00		\$19,000.00	735 ILCS 5/12-1006
	Debtor: Roth IRA Line from Schedule A/B: 21.1	\$19,000.00		\$19,000.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1006
3.		of more than \$160,375 years after that for ca	5? ises fi	100% of fair market value, up to any applicable statutory limit	nt.)

Ca	se 17-25859	Doc 1 Filed 08/29/17 Document	Page 18	0 08/29/17 13: of 57	43:15 Desc N	<i>i</i> lain
Fill in this inform	nation to identify you		1 11011. 110			
Debtor 1	Debra A Podzin	nek				
200001	First Name	Middle Name	Last Name		-	
Debtor 2						
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States Bar	nkruptcy Court for the	NORTHERN DISTRICT OF IL	LINOIS		_	
Case number						
(if known)					☐ Check	c if this is an
					amen	ded filing
Official Forms	100D					
Official Form						
Schedule	D: Creditors	Who Have Claims	Secured	by Propert	У	12/15
		If two married people are filing toget				
s needed, copy the number (if known).	Additional Page, fill it	out, number the entries, and attach i	t to this form. Of	the top or any additio	nai pages, write your na	ime and case
1. Do any creditors	have claims secured by	y your property?				
☐ No. Check	this box and submit t	his form to the court with your othe	r schedules. Yo	ou have nothing else t	to report on this form.	
Yes Fill in	all of the information	helow		-	·	
		below.				
	I Secured Claims			Column A	Column B	Column C
		more than one secured claim, list the cr s a particular claim, list the other credito		Amount of claim	Value of collateral	Unsecured
		cal order according to the creditor's nar		Do not deduct the	that supports this	portion
2.1 PNC Morte	gage	Describe the property that secures	the claim:	value of collateral. \$274,087.00	s330,000.00	If any \$0.00
Creditor's Name		703 Cambridge Lane Shore				
		60404 Will County	,			
PO Box 65		As of the date you file, the claim is	* Chack all that			
Carol Stre	,	apply.	- Check all that			
60197-653		Contingent				
Number, Street,	City, State & Zip Code	Unliquidated				
M // (ll-)	510 01 1	☐ Disputed				
Who owes the de	bt? Check one.	Nature of lien. Check all that apply.				
Debtor 1 only			mortgage or sec	ured		
Debtor 2 only						
Debtor 1 and De	•	Statutory lien (such as tax lien, me	echanic's lien)			
	ne debtors and another	☐ Judgment lien from a lawsuit				
☐ Check if this cla community del		Other (including a right to offset)	Mortgage			
Date debt was incu	urred	Last 4 digits of account nun	nber <u>7281</u>			
Add the dollar va	lue of your entries in C	column A on this page. Write that nur	nber here:	\$274,08	37.00	
If this is the last		the dollar value totals from all pages	5.	\$274,08		

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

=	in this inforn	nation to identify your o		Ocument Pa	age 19 of 5	57		
Deh	otor 1	Debra A Podzimel	·					
	7.01	First Name	Middle Nar	me Las	t Name			
	otor 2 use if, filing)	First Name	Middle Nar	me Las	t Name			
Unit	ted States Bar	nkruptcy Court for the:	NORTHERN	DISTRICT OF ILLINOI	IS			
Cas	e number							
(if kn	own)						_	k if this is an ded filing
	ioial Farm	106E/E					I	Ç
	<u>icial Form</u> hedule E	<u>। ।∪७⊏/୮</u> /F: Creditors W	ho Have	Unsecured Cla	ims			12/15
iche iche eft. /	dule G: Execut dule D: Credito Attach the Con e and case nun	racts or unexpired leases tory Contracts and Unexpi ors Who Have Claims Sect tinuation Page to this pag nber (if known).	red Leases (Off ured by Property e. If you have no	icial Form 106G). Do not y. If more space is neede o information to report in	include any creed, copy the Part	ditors with partially s you need, fill it out,	secured claims that number the entries	are listed in in the boxes on the
Par	t 1: List Al	I of Your PRIORITY Un	secured Claim	ns				
	_ ′	rs have priority unsecured	d claims against	you?				
	☐ No. Go to Pa	art 2.						
	Yes.							
	identify what typ possible, list the	priority unsecured claims be of claim it is. If a claim hat e claims in alphabetical orde than one creditor holds a pa	s both priority and raccording to the	d nonpriority amounts, list e creditor's name. If you ha	that claim here an	nd show both priority a	and nonpriority amou	nts. As much as
	(For an explana	ation of each type of claim, s	ee the instruction	ns for this form in the instru	uction booklet.)	Total claim	Priority amount	Nonpriority amount
2.1	Illinois I	Department of Rever	nue Las	st 4 digits of account nur	XXX-XX-	\$900.00	\$900.00	
	Bankru	editor's Name otcy Section Level 7- Randolph Street	- 425 Wh	en was the debt incurred	d? 12/31/1 3	3	-	
		o, IL 60606						
	Number St	reet City State Zlp Code	As	of the date you file, the	claim is: Check a	II that apply		
	Who incurred	I the debt? Check one.		Contingent				
	Debtor 1 o	nly		Unliquidated				
	Debtor 2 o	nly		Disputed				
	Debtor 1 a	nd Debtor 2 only	Тур	oe of PRIORITY unsecure	ed claim:			
	☐ At least on	e of the debtors and anothe	r 🗆	Domestic support obligation	ons			
	☐ Check if the	his claim is for a commun	ity debt	Taxes and certain other d	ebts you owe the	government		
		subject to offset?	•	Claims for death or persor	•	•		
	■ No			Other. Specify				
	☐ Yes				e taxes			_

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Debtor 1 Debra A Podzimek					
IRS - Bankruptcy Notice	Last 4 digits of account number	xxx-xx-	\$1,400.00	\$1,400.00	\$0.00
Priority Creditor's Name Centralized Insolvency Operations PO Box 7346 Philadelphia, PA 19101-7346	When was the debt incurred?	12/31/2013	<u> </u>		
Number Street City State Zlp Code	As of the date you file, the claim	is: Check all the	at apply		
Who incurred the debt? Check one.	☐ Contingent				
■ Debtor 1 only	☐ Unliquidated				
Debtor 2 only	☐ Disputed				
☐ Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured cla	im:			
☐ At least one of the debtors and another	☐ Domestic support obligations				
☐ Check if this claim is for a community debt	Taxes and certain other debts y	ou owe the gov	ernment		
Is the claim subject to offset?	Claims for death or personal inj				
■ No	Other. Specify				
☐ Yes	Notice of b	k and/or ad	lversary		
 Do any creditors have nonpriority unsecured clair □ No. You have nothing to report in this part. Submit ■ Yes. List all of your nonpriority unsecured claims in the 	this form to the court with your other s		h claim. If a creditor h	as more than one non	priority
No. You have nothing to report in this part. Submit■ Yes.	this form to the court with your other states alphabetical order of the creditor sclaim. For each claim listed, identify when the creditor of the creditors are claim.	vho holds eacl at type of claim	it is. Do not list claims	s already included in P ns fill out the Continuat	art 1. If more ion Page of
■ No. You have nothing to report in this part. Submit ■ Yes. List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each of than one creditor holds a particular claim, list the other Part 2. Capital One	this form to the court with your other states alphabetical order of the creditor sclaim. For each claim listed, identify when the creditor of the creditors are claim.	who holds eact at type of claim nan three nonpo	it is. Do not list claims riority unsecured claim	s already included in P	art 1. If more ion Page of aim
■ No. You have nothing to report in this part. Submit ■ Yes. I. List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each of than one creditor holds a particular claim, list the other Part 2. Capital One Nonpriority Creditor's Name Bankruptcy Department P.O. Box 5155	e alphabetical order of the creditor claim. For each claim listed, identify where creditors in Part 3.If you have more to	who holds eacl at type of claim nan three nonpi 7254,71	it is. Do not list claims riority unsecured claim	s already included in P ns fill out the Continuat	art 1. If more ion Page of aim
■ No. You have nothing to report in this part. Submit ■ Yes. I. List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each of than one creditor holds a particular claim, list the other Part 2. Capital One Nonpriority Creditor's Name Bankruptcy Department	e alphabetical order of the creditor obtain. For each claim listed, identify what creditors in Part 3.If you have more to	vho holds eact at type of claim nan three nonprior 7254,71 er 497,335	it is. Do not list claims riority unsecured claims 182,2	s already included in P ns fill out the Continuat	art 1. If more ion Page of aim
■ No. You have nothing to report in this part. Submit ■ Yes. 1. List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each of than one creditor holds a particular claim, list the other Part 2. 1.1 Capital One Nonpriority Creditor's Name Bankruptcy Department P.O. Box 5155 Norcross, GA 30091 Number Street City State Zlp Code	e alphabetical order of the creditor obtain. For each claim listed, identify what creditors in Part 3.If you have more to the creditors in Part 4 digits of account numb. When was the debt incurred?	vho holds eact at type of claim nan three nonprior 7254,71 er 497,335	it is. Do not list claims riority unsecured claims 182,2	s already included in P ns fill out the Continuat	art 1. If more ion Page of aim
No. You have nothing to report in this part. Submit Yes. List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each of than one creditor holds a particular claim, list the other part 2. Capital One Nonpriority Creditor's Name Bankruptcy Department P.O. Box 5155 Norcross, GA 30091 Number Street City State Zlp Code Who incurred the debt? Check one.	e alphabetical order of the creditor claim. For each claim listed, identify where creditors in Part 3.If you have more to the Last 4 digits of account numb. When was the debt incurred? As of the date you file, the cla	vho holds eact at type of claim nan three nonprior 7254,71 er 497,335	it is. Do not list claims riority unsecured claims 182,2	s already included in P ns fill out the Continuat	art 1. If more ion Page of aim
No. You have nothing to report in this part. Submit Yes. List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each of than one creditor holds a particular claim, list the other part 2. Capital One Nonpriority Creditor's Name Bankruptcy Department P.O. Box 5155 Norcross, GA 30091 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only	e alphabetical order of the creditor oblaim. For each claim listed, identify what creditors in Part 3.If you have more to the Last 4 digits of account numb When was the debt incurred? As of the date you file, the cla	vho holds eact at type of claim nan three nonprior 7254,71 er 497,335	it is. Do not list claims riority unsecured claims 182,2	s already included in P ns fill out the Continuat	art 1. If more ion Page of aim
No. You have nothing to report in this part. Submit Yes. List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each of than one creditor holds a particular claim, list the other Part 2. Capital One Nonpriority Creditor's Name Bankruptcy Department P.O. Box 5155 Norcross, GA 30091 Number Street City State Zlp Code Who incurred the debt? Check one. □ Debtor 1 only □ Debtor 2 only	e alphabetical order of the creditor obtain. For each claim listed, identify what creditors in Part 3.If you have more to be also be a	who holds each at type of claim nan three nonpi 7254,71 er 497,339 m is: Check all	it is. Do not list claims riority unsecured claims 182,2	s already included in P ns fill out the Continuat	art 1. If more ion Page of aim
No. You have nothing to report in this part. Submit Yes. List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each of than one creditor holds a particular claim, list the other Part 2. Capital One Nonpriority Creditor's Name Bankruptcy Department P.O. Box 5155 Norcross, GA 30091 Number Street City State Zlp Code Who incurred the debt? Check one. □ Debtor 1 only □ Debtor 2 only □ Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt	e alphabetical order of the creditor claim. For each claim listed, identify where creditors in Part 3.If you have more to be a second to be a	vho holds each at type of claim nan three nonprint 7254,71 er 497,339 em is: Check all ured claim:	it is. Do not list claims riority unsecured claims [82,2]	s already included in P ns fill out the Continuat Total cl	art 1. If more ion Page of aim
No. You have nothing to report in this part. Submit Yes. List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each of than one creditor holds a particular claim, list the other part 2. Capital One Nonpriority Creditor's Name Bankruptcy Department P.O. Box 5155 Norcross, GA 30091 Number Street City State Zlp Code Who incurred the debt? Check one. □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community	e alphabetical order of the creditor oblaim. For each claim listed, identify what creditors in Part 3.If you have more to be a count numb. Last 4 digits of account numb. When was the debt incurred? As of the date you file, the claim count of the cou	vho holds each at type of claim nan three nonprint and three nonprint	it is. Do not list claims riority unsecured claims [82,2] 182,2 199 I that apply ement or divorce that y	s already included in P ns fill out the Continuat Total cl	art 1. If more ion Page of

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		40 -04 45
Card Services Nonpriority Creditor's Name	Last 4 digits of account number 5521	\$3,704.45
PO Box 60517	When was the debt incurred?	
City of Industry, CA 91716-0517 Number Street City State Zlp Code	As of the date was file the plainties OU	
Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	Other. Specify AA Airlines credit card	
Cardmember Services	Last 4 digits of account number 9268	\$32,000.00
Nonpriority Creditor's Name		· · · · · · · · · · · · · · · · · · ·
PO Box 1423 Charlotte, NC 28201-1423	When was the debt incurred?	
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	□ Unliquidated	
☐ Debtor 1 and Debtor 2 only	□ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	\square Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify 4147202258755790 credit card	
	2161,1454,3	
Citi Cards	Last 4 digits of account number 147	\$25,000.00
Nonpriority Creditor's Name	When was the debt incurred?	
PO Box 78045 Phoenix, AZ 85062	When was the debt incurred?	
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
■ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
■ No	Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	■ Other Specify credit card	

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Debtor 1 Debra A Podzimek Case number (if know) 4.5 \$191.82 **Crepe Erase** Last 4 digits of account number 6770 Nonpriority Creditor's Name PO Box 2002 When was the debt incurred? Harlan, IA 51593 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify 4.6 **Discover FIN SVCS LLC** Last 4 digits of account number 1471 \$9,470.50 Nonpriority Creditor's Name Attn: Bankruptcy Dept. When was the debt incurred? PO Box 15316 Wilmington, DE 19850 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify credit card ☐ Yes 4.7 Fifth Third Bank \$17,907.24 Last 4 digits of account number 5590 Nonpriority Creditor's Name PO Box 740789 When was the debt incurred? Cincinnati, OH 45274-0789 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify credit card

☐ Yes

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Case number (if know)

Home Depot Credit Services	Last 4 digits of account number 3004	\$11,914.22
Nonpriority Creditor's Name PO Box 78011 Phoenix, AZ 85062	When was the debt incurred?	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	Other. Specify credit card Other. Specify credit card	
Macy's	Last 4 digits of account number 1015	\$842.00
Nonpriority Creditor's Name	Last 4 digits of account number 1013	\$04Z.UU
Bankrupcy Processing PO Box 8053	When was the debt incurred?	
Mason, OH 45040	As of the date were file the plates to Observe What some	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify credit card	
Manufa Hannifal	4404	#4 000 00
Morris Hospital Nonpriority Creditor's Name	Last 4 digits of account number 4101	\$1,082.60
Business Office	When was the debt incurred?	
150 West High St.		
Morris, IL 60450-1497	- A file has a file de dels la Ol de Hiller de d	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
■ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
□ Yes	■ Other. Specify medical	
□ 1€3	Other. Specify Medical	

Document Page 24 of 57 Case number (if know) Debtor 1 Debra A Podzimek 4.1 **Nationwide Credit & Collection** 9560 \$244.00 Last 4 digits of account number Nonpriority Creditor's Name P.O. Box 3219 When was the debt incurred? Oak Brook, IL 60523-8852 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Collection for DuPage Medical Group ☐ Yes 4.1 **Nationwide Credit & Collection** 9560 \$216.49 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? P.O. Box 3219 Oak Brook, IL 60523-8852 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify collection for DuPage Medical Group ☐ Yes 4.1 **Neiman Marcus** \$1.123.29 1553 Last 4 digits of account number Nonpriority Creditor's Name P.O. Box 5235 When was the debt incurred? Carol Stream, IL 60197-5235 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not

■ No

☐ Yes

report as priority claims

■ Other. Specify credti card

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

Is the claim subject to offset?

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Debtor 1 Debra A Podzimek Case number (if know) 4.1 Nordstrom FSB 9624 \$12,484.07 Last 4 digits of account number 4 Nonpriority Creditor's Name PO Box 13589 When was the debt incurred? Scottsdale, AZ 85267 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify credit card 4.1 Northeast Endocrinology 0613 \$284.57 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 2222 Weber Road Joliet, IL 60435 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts Other. Specify medical ☐ Yes 4.1 PavPal Credit 6788 \$1.059.99 Last 4 digits of account number 6 Nonpriority Creditor's Name PO Box 105658 When was the debt incurred? Atlanta, GA 30348-5658 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify credit

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Debt	or 1 Debra A Podzimek	Document Page 26 of 57 Case number (if know)	
4.1	 		
7	PNC Bank	Last 4 digits of account number 7774	\$3,295.34
	Nonpriority Creditor's Name PO Box 856177	When was the debt incurred?	
	Louisville, KY 40285-6177		
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify credit card	
4.1	SYNCHRONY Bank	Last 4 digits of account number 6938,0304	\$17,000.00
8	Nonpriority Creditor's Name		VIII,000100
	ALL Bankruptcy Notices PO Box 965061	When was the debt incurred?	
	Orlando, FL 32896-5061	_	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	<u> </u>		
	■ Debtor 1 only	Contingent	
	Debtor 2 only	Unliquidated	
	Debtor 1 and Debtor 2 only	Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim: ☐ Student loans	
	☐ Check if this claim is for a community debt		
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other Specify Credit Card	
4.1	Vicion Financial Comicae	7024	¢277.02
9	Vision Financial Services Nonpriority Creditor's Name	Last 4 digits of account number 7034	\$377.93
	PO Box 1768 La Porte, IN 46352-1768	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	

Part 3: List Others to Be Notified About a Debt That You Already Listed

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

■ Other. Specify medical collection for Silver Cross

■ No

☐ Yes

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

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Debtor 1 Debra A Podzimek		Case number (if know)			
Name and Address	On which entry in Part 1 or Part 2 did you list the original creditor?				
Dupage Medical Group	Line 4.11 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims			
15921 Collections Center Drive		■ Part 2: Creditors with Nonpriority Unsecured Claims			
Chicago, IL 60693	Last 4 digits of account number				
Name and Address	On which entry in Part 1 or Part 2	2 did you list the original creditor?			
MiraMed Revenue Group	Line 4.10 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims			
Dept 77304 PO Box 77000		■ Part 2: Creditors with Nonpriority Unsecured Claims			
Detroit, MI 48277-0304					
56.161., III 40211 6664	Last 4 digits of account number				
Name and Address	On which entry in Part 1 or Part 2	2 did you list the original creditor?			
MiraMed Revenue Group	Line 4.19 of (<i>Check one</i>):	☐ Part 1: Creditors with Priority Unsecured Claims			
Dept 77304		■ Part 2: Creditors with Nonpriority Unsecured Claims			
PO Box 77000 Detroit, MI 48277-0304					
200., 102 3004	Last 4 digits of account number				

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 2,300.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 2,300.00
				Total Claim
	6f.	Student loans	6f.	\$ 0.00
Total claims				
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 148,398.51
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 148,398.51

			111 FAUE 70 ULST	
Fill in this infor	rmation to identify your	case:		
Debtor 1	Debra A Podzime	k		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States B	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - □ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

P	erson or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code	State what the contract or lease is for
2.1	Essington Point 1910 Essington Rd. Shorewood, IL 60404	Month to Month Lease for PD Brown Enterprises Inc space at 1902 Essington Road, Joliet. Debtor will assume lease.
2.2	Nissan Motor Acceptance Corporation Attn: Bankruptcy 8900 Freeport Parkway Irving, TX 75063-2438	2017 Infinity Vehicle Lease Debtor Assumes Lease. Vehicle payment is \$620 per month for 36 months.
2.3	NVP Properties 1136 W. Jefferson St. Shorewood, IL 60404	Debtor is co-signer on the Lease with PD Brown Enterprises Inc for the location at 1136 W Jefferson Street, Shorewood, IL 60404. Debtor assumes lease.

		Document	Page 29 of	57	
Fill in thi	s information to identify your	case:			
Debtor 1	Debra A Podzime	J _z			
Deptor 1	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, f	iling) First Name	Middle Name	Last Name		
United St	ates Bankruptcy Court for the:	NORTHERN DISTRICT OF I	ILLINOIS		
Case nur	mber				☐ Check if this is an
(amended filing
					3
Officia	al Form 106H				
Scho	dule H: Your Cod	ohtors			12/15
<u> </u>	dule II. Tour Cou	CDIOIS			12/13
Cadabtas	o ara maanla ar antitiaa wha a	re elec lichle for env debte ve	ou may have. Be see	amminta and accura	to an mannible. If two married
	s are people or entities who a				eeded, copy the Additional Page,
					of any Additional Pages, write
your nam	e and case number (if known)	. Answer every question.	-		
1. Do	you have any codebtors? (If	vou are filing a joint case, do no	ot list either spouse as	a codebtor	
		, o a a. og a jo o ao o, a o	or mor our or opouco ac		
■ Ye	es				
2 W	ithin the last 8 years, have you	ı lived in a community proper	ty state or territory?	(Community property	states and territories include
	na, California, Idaho, Louisiana,				states and territories include
			_		
■ No	o. Go to line 3.				
□ Ye	es. Did your spouse, former spou	use, or legal equivalent live with	you at the time?		
3. In Co	olumn 1, list all of your codebt	ors. Do not include your spo	use as a codebtor if	your spouse is filing	with you. List the person shown
in lir	ne 2 again as a codebtor only i	f that person is a guarantor o	or cosigner. Make su	re you have listed the	e creditor on Schedule D (Official
	n 106D), Schedule E/F (Official Column 2.	Form 106E/F), or Schedule G	G (Official Form 1060	6). Use Schedule D, S	Schedule E/F, or Schedule G to fill
out	Solullii 2.				
	Column 1: Your codebtor				ditor to whom you owe the debt
	Name, Number, Street, City, State and ZI	P Code		Check all schedules	s that apply:
3.1	PD Brown Enterprises Inc	;		☐ Schedule D, lin	ne
	703 Cambridge Lane			☐ Schedule E/F,	line
	Shorewood, IL 60404			■ Schedule G	2.3
				NVP Properties	
3.2	PD Brown Enterprises Inc	•		□ Schedule D. lin	Δ
٥.۷	703 Cambridge Lane	•		☐ Schedule D, lin☐ Schedule E/F,	line
	Shorewood, IL 60404				
	,			Schedule G	
				Essington Point	

Schedule H: Your Codebtors

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	in this information to identify your					ı			
	in this information to identify your countries to a Debra A Poor								
	btor 2 buse, if filing)				_				
Uni	ited States Bankruptcy Court for the	: NORTHERN DISTRIC	CT OF ILLINOIS						
O Se Be a sup spo atta	fficial Form 106l chedule I: Your Incomes complete and accurate as possiblying correct information. If you use. If you are separated and you ch a separate sheet to this form.	sible. If two married peo are married and not fili or spouse is not filing w	ng jointly, and your s ith you, do not includ	spouse de infor	is liv matic	13 income MM / DD/ and Debtor 2), being with you, income	ed filing ent show as of the YYYY oth are elude info ouse. If	ormation about your more space is needed	/15
Par 1.	Till in your employment								
١.	information.		Debtor 1			Debtor	2 or nor	-filing spouse	
	If you have more than one job, attach a separate page with	Employment status	■ Employed			■ Emp	oyed		
	information about additional	. ,	☐ Not employed			☐ Not €	☐ Not employed		
	employers.	Occupation	Self Employed			Respir	atory T	herapist	
	Include part-time, seasonal, or self-employed work.	Employer's name	PD Brown Enter	prises	Inc.	Northy	estern/	Valley West	
	Occupation may include student or homemaker, if it applies.	Employer's address	703 Cambridge Shorewood, IL 6				Main S		
		How long employed t	here? 15 Year	s			8 Years	<u>:</u>	
Pai	Give Details About Mor	nthly Income							_
	mate monthly income as of the duse unless you are separated.	ate you file this form. If	you have nothing to re	port for	any l	ine, write \$0 in the	space.	Include your non-filing	
	ou or your non-filing spouse have mo e space, attach a separate sheet to		ombine the information	n for all e	emplo	oyers for that pers	on on the	e lines below. If you nee	d
						For Debtor 1		Debtor 2 or filing spouse	
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$	0.00	\$	7,096.27	
3.	Estimate and list monthly overt	ime pay.		3.	+\$	0.00	+\$	0.00	

0.00

7,096.27

Calculate gross Income. Add line 2 + line 3.

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Debt	or 1	Debra A Podzimek	_	Ca	ase number (if known)			
				F	For Debtor 1	For Debtor	2 or	
						non-filing s	spouse	
	Cop	y line 4 here	4.	9	0.00	\$7	,096.27	_
5.	List	all payroll deductions:						
	5a.	Tax, Medicare, and Social Security deductions	5a.	9	0.00	\$ 1	,127.53	}
	5b.	Mandatory contributions for retirement plans	5b.	9		\$	0.00	
	5c.	Voluntary contributions for retirement plans	5c.	\$	0.00	\$	0.00)
	5d.	Required repayments of retirement fund loans	5d.	\$	0.00	\$	0.00)
	5e.	Insurance	5e.	\$	0.00	\$	0.00	<u> </u>
	5f.	Domestic support obligations	5f.	9	0.00	\$	0.00	<u> </u>
	5g.	Union dues	5g.	9	0.00	\$	0.00	<u> </u>
	5h.	Other deductions. Specify: Medical	5h.+	+ \$	0.00	+ \$	642.59)
		Dental	_	\$	0.00	\$	68.94	<u> </u>
		Vision		9	0.00	\$	19.26	<u>;</u>
		401K		,	0.00	\$	212.90)
		Child Support	_	\$		\$ <u>1</u>	,872.00	<u>) </u>
		Cafeteria	_	\$	0.00	\$	141.35	<u>5</u> _
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	0.00	\$4	,084.57	_
7.	Cald	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	0.00	\$3	,011.70	<u>) </u>
8.	8b. 8c. 8d. 8e. 8f.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. Interest and dividends Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. Unemployment compensation Social Security Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income	8c. 8d. 8e.	97 97	0.00 5 1,500.00 6 0.00 6 0.00	\$ \$ \$ \$ \$	0.00 0.00 0.00 0.00 0.00	
	8h.	Non-Filing Spouse Partnership Other monthly income. Specify: Income \$3,000	8h.+	۰ ۹	0.00	+ \$	250.00)
	· · · ·	<u>πισοπιο φο,σου</u>		_				_
9.	Add	l all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	2,207.86	\$	250.0	0
10.			10. \$		2,207.86 + \$	3,261.70	= \$_	5,469.56
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.						
11.	Inclu othe	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your per friends or relatives. In the include any amounts already included in lines 2-10 or amounts that are not a cify:	depen		•	ed in <i>Schedul</i> e	∍ J. +\$	0.00
12.		I the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certai						
	appl		п ыар	mue	es and Related Data	12.	\$	5,469.56
12	D	you expect an increase or decrease within the year often you file this forms	2				Combi month	ned ly income
13.		you expect an increase or decrease within the year after you file this form	ſ					
		No. Yes Explain:						

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Fill in this inform	mation to identify y	our case:					
Debtor 1	Debra A Pod				Chi	eck if this is:	
	Debla A 1 oc	12IIIIGK		_		An amended filing	
Debtor 2							wing postpetition chapter
(Spouse, if filing)						13 expenses as of	the following date:
United States Ba	nkruptcy Court for the	: NORTH	IERN DISTRICT OF ILLIN	OIS		MM / DD / YYYY	
Case number							
(If known)							
Official F	- 10C I						
	orm 106J	 Evnor	200				40/45
	le J: Your		ISES If two married people a	re filing together, he	oth are ea	ually responsible fo	12/15
information. If		eded, atta	ch another sheet to this				
	scribe Your House	ehold					
1. Is this a j	oint case?						
■ No. Go □ Yes. D	to line 2.	in a separa	ate household?				
<u> </u>	No Yes. Debtor 2 mu	st file Offici	al Form 106J-2, <i>Expenses</i>	s for Separate House	<i>hold</i> of De	btor 2.	
2. Do you h	ave dependents?	□ No					
Do not list Debtor 2.	Debtor 1 and	■ Yes.	Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor		Dependent's age	Does dependent live with you?
Do not sta	ate the						□ No
dependen	its names.			Step-Son		11	■ Yes
							□ No
				Step-Son		13	■ Yes
							□ No
				Son		16	■ Yes
				Doughtor		22	□ No
				Daughter			■ Yes □ No
				Son		24	■ Yes
3. Do your e	expenses include		No				– 163
	s of people other t and your depende	than 🗖	Yes				
	imate Your Ongoi						
Estimate your expenses as c applicable dat	of a date after the	our bankru bankruptc	uptcy filing date unless y y is filed. If this is a supp	ou are using this fo plemental <i>Schedul</i> e	orm as a s J, check	supplement in a Cha the box at the top o	apter 13 case to report of the form and fill in the
Include expen	ses paid for with	non-cash	government assistance i	f you know			
	uch assistance an		luded it on Schedule I: Y			Your exp	enses
	al or home owners and any rent for th		ses for your residence. I r lot.	nclude first mortgage	4.	\$	3,023.00
If not incl	uded in line 4:						
4a. Rea	al estate taxes				4a.	\$	0.00
	perty, homeowner'	s, or renter	's insurance		4b.	·	0.00
	ne maintenance, re					\$	0.00
	meowner's associa					\$	0.00
5. Additiona	ai mortgage paym	ents for yo	our residence, such as ho	me equity loans	5.	\$	0.00

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Debtor 1 Debra A Podzimek Case number (if known)

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tor 1	Debra A Podzimek	Case num	ber (if known)	
Utilitie	es:			
	Electricity, heat, natural gas	6a.	\$	0.00
	Water, sewer, garbage collection	6b.	· -	0.00
	Telephone, cell phone, Internet, satellite, and cable services	6c.		0.00
	Other. Specify:	6d.		0.00
	· • •		· -	
	and housekeeping supplies	7.		650.00
	care and children's education costs	8.	\$	100.56
	ing, laundry, and dry cleaning	9.	·	50.00
	onal care products and services	10.		50.00
. Medic	cal and dental expenses	11.	\$	100.00
	sportation. Include gas, maintenance, bus or train fare. It include car payments.	12.	\$	200.00
	tainment, clubs, recreation, newspapers, magazines, and books	13.	·	0.00
			· -	
	table contributions and religious donations	14.	Ф	0.00
. Insura				
	t include insurance deducted from your pay or included in lines 4 or 20. Life insurance	15a.	¢	0.00
			·	0.00
	Health insurance	15b.		0.00
	Vehicle insurance	15c.	· -	0.00
	Other insurance. Specify:	15d.	\$	0.00
Taxes Specif	s. Do not include taxes deducted from your pay or included in lines 4 or 20. fy:	16.	\$	0.00
•	Iment or lease payments:		·	0.00
	Car payments for Vehicle 1	17a.	\$	0.00
	Car payments for Vehicle 2	17b.	*	0.00
	Other Specific	17c.	·	0.00
		176. 17d.	*	
	Other. Specify:		>	0.00
	payments of alimony, maintenance, and support that you did not repo		\$	0.00
	cted from your pay on line 5, Schedule I, Your Income (Official Form 1	061).	\$	
	payments you make to support others who do not live with you.	40	Φ	0.00
Specif	·	19.		
	real property expenses not included in lines 4 or 5 of this form or on			0.00
	Mortgages on other property	20a.		0.00
	Real estate taxes	20b.	·	0.00
	Property, homeowner's, or renter's insurance	20c.		0.00
20d.	Maintenance, repair, and upkeep expenses	20d.	\$	0.00
20e.	Homeowner's association or condominium dues	20e.	\$	0.00
. Other	: Specify: Lease Payment	21.	+\$	620.00
	Filing Spouse Auto Payment		+\$	426.00
	· · · · · · · · · · · · · · · · · · ·			
	late your monthly expenses			
	Add lines 4 through 21.		\$	5,219.56
22b. C	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106	6J-2	\$	_
22c. A	Add line 22a and 22b. The result is your monthly expenses.		\$	5,219.56
			· —	5,210.00
	late your monthly net income.			
23a.	Copy line 12 (your combined monthly income) from Schedule I.	23a.		5,469.56
23b.	Copy your monthly expenses from line 22c above.	23b.	-\$	5,219.56
23c	Subtract your monthly expenses from your monthly income.			050 00
200.	The result is your monthly net income.	23c.	\$	250.00
4. Do yo For exa	ou expect an increase or decrease in your expenses within the year after ample, do you expect to finish paying for your car loan within the year or do you expectation to the terms of your mortgage?			e or decrease because
. Do yo For exa	ample, do you expect to finish paying for your car loan within the year or do you exper cation to the terms of your mortgage?			e or decrease because

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Fill in this infor	mation to identify your	case:					
Debtor 1	Debra A Podzime						
Dahtano	First Name	Middle Name	Last Name				
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name				
United States Ba	ankruptcy Court for the:	NORTHERN DISTRIC	T OF ILLINOIS				
Case number (if known)					☐ Check if this is an amended filing		
Official For							
Declara	tion About a	in Individua	I Debtor's So	chedules	12/15		
•	8 U.S.C. §§ 152, 1341, 1 n Below	519, and 3571.					
Did you pa	ay or agree to pay some	one who is NOT an atto	orney to help you fill out I	bankruptcy forms?			
■ No							
☐ Yes.	Name of person				th Bankruptcy Petition Preparer's Notice, aration, and Signature (Official Form 119)		
	alty of perjury, I declare re true and correct.	that I have read the sur	nmary and schedules file	ed with this declaration ar	nd		
X /s/ Del	bra A Podzimek		X				
	A Podzimek ure of Debtor 1		Signature of	f Debtor 2			
Date	August 29, 2017		Date				

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-HI	in this inform	ation to identify you	. 0250:				
_							
Dei	otor 1	Debra A Podzim First Name	Middle Name		Last Name		
	otor 2 ouse if, filing)	First Name	Middle Name		Last Name		
Uni	ted States Bar	kruptcy Court for the:	NORTHERN DISTRICT	OF ILLI	NOIS		
	se number					_	Check if this is an
Sta	as complete a	of Financial		are filir	ng together, both are	equally responsible for sup	
nun	nber (if known). Answer every ques	stion.			additional pages, write you	ur name and case
Par 1			rital Status and Where Yo	ou Lived	Before		
١.	—	current marital statu	5 !				
	■ Married□ Not married	ried					
2.	During the la	st 3 years, have you	lived anywhere other than	n where	you live now?		
	■ No □ Yes. List	all of the places you I	ived in the last 3 years. Do	not inclu	de where you live now	:	
	Debtor 1 Pri	or Address:	Dates Debtor lived there	1	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
3. state						ity property state or territor co, Texas, Washington and V	
	■ No □ Yes. Ma	ke sure you fill out <i>Scl</i>	nedule H: Your Codebtors (Official F	Form 106H).		
Pai	rt 2 Explain	n the Sources of You	r Income				
4.	Fill in the tota	amount of income yo	nployment or from operat u received from all jobs and have income that you rece	l all busi	nesses, including part-		ndar years?
	□ No ■ Yes. Fill	in the details.					
			Debtor 1			Debtor 2	
			Sources of income Check all that apply.	(bet	oss income fore deductions and lusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
From January 1 of current year until the date you filed for bankruptcy:			☐ Wages, commissions, bonuses, tips		\$8,000.00	■ Wages, commissions, bonuses, tips	\$49,128.00
			Operating a business			☐ Operating a business	

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				Debtor 1			Debtor 2		
				Sources of income		income	Sources of inco		Gross income
				Check all that apply.	(befor exclus	e deductions and ions)	Check all that app	oly.	(before deductions and exclusions)
For last calendar year: (January 1 to December 31, 2016)		■ Wages, commissions, bonuses, tips		\$83,307.00	☐ Wages, comm bonuses, tips	iissions,			
				Operating a business			☐ Operating a b	usiness	
		dar year be December		☐ Wages, commissions, bonuses, tips		\$8,577.00	■ Wages, comm bonuses, tips	iissions,	\$96,658.00
				Operating a business			Operating a be	usiness	
	the calen	dar year: December	31, 2014)	☐ Wages, commissions, bonuses, tips		\$57,508.00	■ Wages, comm bonuses, tips	nissions,	\$76,204.00
				Operating a business			☐ Operating a b	usiness	
	the calenduary 1 to	dar year: December	31, 2013)	☐ Wages, commissions, bonuses, tips		\$61,817.00	■ Wages, common bonuses, tips	nissions,	\$90,309.00
				Operating a business			Operating a b	usiness	
	■ No □ Yes.	Fill in the de	etails.						
				Debtor 1 Sources of income	Gross	income from	Debtor 2 Sources of inco	mo	Gross income
				Describe below.	each	source e deductions and	Describe below.	ine	(before deductions and exclusions)
Part	3: List	Certain Pa	yments You	Made Before You Filed for	r Bankrup	tcy			
	□ No.	Neither Deindividual During the No. Yes * Subject Debtor 1 of During the	90 days before Go to line 7 List below expaid that crunot include to adjustment or Debtor 2 o 90 days before To paid to adjust to a days before To paid to a days before To	each creditor to whom you pa editor. Do not include payme payments to an attorney for on 4/01/19 and every 3 year r both have primarily cons re you filed for bankruptcy, of	sumer deboold purposed did you pay aid a total depents for do this bankrurs after the sumer deb	e." v any creditor a total of \$6,425* or more is mestic support oblig uptcy case. at for cases filed on ts.	of \$6,425* or more n one or more paym ations, such as chile or after the date of	e? nents and th d support a	ne total amount you nd alimony. Also, do
		□ No. ■ Yes	include pay	each creditor to whom you par ments for domestic support this bankruptcy case.					
	Creditor'	s Name and	d Address	Dates of paym	ent	Total amount	Amount you still owe	Was this p	ayment for

paid

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Document Debtor 1 Debra A Podzimek

	Creditor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this pa	ayment for
	IRS - Bankruptcy Notice Centralized Insolvency Operations PO Box 7346 Philadelphia, PA 19101-7346	4/15/2017 Income Tax Payment for 2013 Taxes	\$5,000.00	\$1,400.00	☐ Mortgage ☐ Car ☐ Credit Ca ☐ Loan Rep ☐ Suppliers ☐ Other 20 taxes	ard payment
7.	Within 1 year before you filed for bankrupt Insiders include your relatives; any general pa of which you are an officer, director, person in a business you operate as a sole proprietor. 1 alimony.	artners; relatives of any gent control, or owner of 20% of	neral partners; partners or more of their voting	erships of which yog g securities; and a	ou are a genera ny managing a	al partner; corporations agent, including one for
	Yes. List all payments to an insider.					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment
8.	Within 1 year before you filed for bankrupt insider? Include payments on debts guaranteed or cos No Yes. List all payments to an insider		yments or transfer a	any property on a	ccount of a do	ebt that benefited an
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for Include cred	this payment
Par	t 4: Identify Legal Actions, Repossession	as and Farcelecures	paid		morado orod	nor o riamo
9.	Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes. No Yes. Fill in the details.					
	Case title Case number	Nature of the case	Court or agency		Status of th	e case
10.	Within 1 year before you filed for bankrupt Check all that apply and fill in the details below No. Go to line 11. Yes. Fill in the information below. Creditor Name and Address			oreclosed, garnis	shed, attached	d, seized, or levied? Value of the property
11.	Within 90 days before you filed for bankrup accounts or refuse to make a payment becomes No Yes. Fill in the details.	otcy, did any creditor, inc ause you owed a debt?	cluding a bank or fii			
	Creditor Name and Address	Describe the action th	e creditor took	Date taker	action was	Amount
12.	Within 1 year before you filed for bankrupt court-appointed receiver, a custodian, or a ■ No □ Yes		erty in the possess	ion of an assigne	e for the bene	efit of creditors, a

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Case number (if known) Document Debtor 1 Debra A Podzimek

Pa	t 5: List Certain Gifts and Contribution	ıs						
13.	Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? ■ No □ Yes. Fill in the details for each gift.							
	Gifts with a total value of more than \$60 per person		Describe the gifts	Dates you gave the gifts	Value			
	Person to Whom You Gave the Gift and Address:							
14.	Within 2 years before you filed for bankr ■ No □ Yes. Fill in the details for each gift or or		did you give any gifts or contributions with a tota	al value of more than	\$600 to any charity?			
	Gifts or contributions to charities that 1 more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code	otal	Describe what you contributed	Dates you contributed	Value			
Pai	t 6: List Certain Losses							
15.	Within 1 year before you filed for bankru or gambling? ■ No □ Yes. Fill in the details.	ptcy or	since you filed for bankruptcy, did you lose any	thing because of the	ft, fire, other disaster,			
	Describe the property you lost and how the loss occurred	Include	ibe any insurance coverage for the loss e the amount that insurance has paid. List pending nce claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost			
Pa	t 7: List Certain Payments or Transfers	5						
16.	consulted about seeking bankruptcy or	prepari	id you or anyone else acting on your behalf pay on a bankruptcy petition? rs, or credit counseling agencies for services requires		erty to anyone you			
	□ No							
	Yes. Fill in the details.							
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not Y	′ou	Description and value of any property transferred	Date payment or transfer was made	Amount of payment			
	Law Office of Patrick A. Meszaros 1100 West Jefferson Joliet, IL 60435		\$2300 Atty Fee + \$310 Filing Fee	8/21/17	\$2,610.00			
17.	Within 1 year before you filed for bankru promised to help you deal with your cree Do not include any payment or transfer that No	ditors o		or transfer any prope	erty to anyone who			
	☐ Yes. Fill in the details.							
	Person Who Was Paid Address		Description and value of any property transferred	Date payment or transfer was made	Amount of payment			

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Debtor 1 **Debra A Podzimek**

18.	Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. No						
	☐ Yes. Fill in the details.						
	Person Who Received Transfer Address	Description and v		payme	ibe any property or ents received or debts n exchange	Date transfer was made	
	Person's relationship to you						
19.	beneficiary? (These are often called asset-pro		y property to a	self-settle	d trust or similar device	of which you are a	
	Yes. Fill in the details.						
	Name of trust	Description and v	alue of the pro	perty trans	ferred	Date Transfer was made	
	List of Certain Financial Accounts, Ins		·	•			
20.	Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. No Yes. Fill in the details.						
		Last Aultuita af	T		D-1	1 (1: - 1 - :	
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of accou	unt or	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer	
21.	Do you now have, or did you have within 1 y cash, or other valuables?	ear before you filed for	bankruptcy, ar	ny safe dep	oosit box or other depos	itory for securities,	
	■ No □ Yes. Fill in the details.						
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S State and ZIP Code)		Describe	the contents	Do you still have it?	
22.	Have you stored property in a storage unit o	or place other than your	home within 1	year befor	e you filed for bankrupt	cy?	
	■ No □ Yes. Fill in the details.						
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	to it?	to it? Address (Number, Street, City,		the contents	Do you still have it?	
Par	t 9: Identify Property You Hold or Control	for Someone Fise					
23.			ude any properi	ty you borr	rowed from, are storing	for, or hold in trust	
	■ No □ Yes. Fill in the details.						
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, S Code)		Describe	the property	Value	
	the purpose of Part 10, the following definition						

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or

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Debtor 1 **Debra A Podzimek**

> toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.

- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.

	hazardous material, pollutant, contaminant, or similar term.						
Rep	Report all notices, releases, and proceedings that you know about, regardless of when they occurred.						
24.	4. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?						
	■ No □ Yes. Fill in the details.						
	Name of site Address (Number, Street, City, State and ZIP Code)		Governmental unit Address (Number, Street, City, State and ZIP Code)		mental law, if you	Date of notice	
25.	Have you notified	any governmental unit of	any release of hazardous material?				
	■ No □ Yes. Fill in the	e details.					
	Name of site Address (Number, S	street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)		nental law, if you	Date of notice	
26.	Have you been a p	party in any judicial or adn	ninistrative proceeding under any envi	ronmental lav	w? Include settlements a	and orders.	
	■ No □ Yes. Fill in the	e details.					
	Case Title Case Number		Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the	e case	Status of the case	
Par	t 11: Give Details	About Your Business or	Connections to Any Business				
27.	Within 4 years bef	ore you filed for bankrupt	cy, did you own a business or have an	y of the follow	wing connections to any	business?	
	☐ A sole pro	prietor or self-employed i	n a trade, profession, or other activity,	either full-tin	ne or part-time		
	■ A member	of a limited liability comp	any (LLC) or limited liability partnershi	ip (LLP)			
	☐ A partner i	n a partnership					
	☐ An officer,	director, or managing ex	ecutive of a corporation				
	☐ An owner	of at least 5% of the voting	g or equity securities of a corporation				
	☐ No. None of the	he above applies. Go to F	Part 12.				
	Yes. Check a	ll that apply above and fill	in the details below for each business	i .			
	Business Name Address (Number, Street, City, S	State and ZIP Code)	Describe the nature of the business Name of accountant or bookkeeper		rer Identification number include Social Security		
	(,,, <u>-</u> ,	,	Name of accountant of bookkeeper	Dates b	ousiness existed		
	PD Brown Ente 703 Cambridge Shorewood, IL	Lane	Operation of 2 Tanning Salons dba Austrailian Sun Tans	EIN: From-T	32-0007884 2/22/02 - current		
			Allied Partners in Acctg and Con- 100 W Illinois St. Ste 201 Saint Charles, IL 60174	5			

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are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Signat	gliature of Debtor 1							
Date	August 29, 2017	Date						
Did you	ı attach additional paç	ges to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?					
■ No								
☐ Yes								
Did you	pay or agree to pay s	someone who is not an attorney to help you fill out bankruptcy forms?						
■ No								
☐ Yes.	Name of Person	Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Offic	ial Form 119).					

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, Use for cases filed on or after September 19, 2016)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtor and the attorney that conflicts with this agreement is void.

A. BEFORE THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule, and explain how and when the attorney's fees and the trustee's fees are determined and paid.

- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.
- 6. Advise the debtor of the need to maintain appropriate insurance.

B. AFTER THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and, when the case is called, for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce).
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

THE ATTORNEY AGREES TO:

- 1. Advise the debtor of the requirement to attend the meeting of creditors and notify the debtor of the date, time, and place of the meeting.
- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.
- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor, in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Prepare, file, and serve a notice of conversion to Chapter 7, pursuant to § 1307(a) of the Bankruptcy Code and Local Bankruptcy Rule 1017-1.
- 17. Provide any other legal services necessary for the administration of the case.

C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3. If the case is converted to a case under Chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the Chapter 7 case for any unpaid fees and expenses, pursuant to § 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

D. RETAINERS AND PREVIOUS PAYMENTS

1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.

□The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:

- (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows:
- (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
- (c) The retainer is a flat fee for the services to be rendered during the Chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;

- (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the Chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation, the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing, including the date(s) any such fees were paid.

E. CONDUCT AND DISCHARGE

- 1. *Improper conduct by the attorney*. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. *Improper conduct by the debtor*. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.

[Remaining page intentionally left blank.]

F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$2,300.00.
- 2. In addition, the debtor will pay the filing fee required in the case and other expenses of \$310.00.
- 3. Before signing this agreement, the attorney has received, \$2,300.00

toward the flat fee, leaving a balance due of \$0.00; and \$0.00 for expenses,

leaving a balance due for the filing fee of \$0.00.

4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

ar in court to object.
(has
Isl Patrick A. Meszaros
Patrick A. Meszaros 6239538
Attorney for the Debtor(s)

Debtor(s)

Do not sign this agreement if the amounts are blank.

Local Bankruptcy Form 23c

Case 17-25859 Doc 1 Filed 08/29/17 Entered 08/29/17 13:43:15 Desc Main Document Page 53 of 57

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Northern District of Illinois

In	re Debra A Podzimek		Case No.				
		Debtor(s)	Chapter	13			
		MPENSATION OF ATTOR					
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. compensation paid to me within one year before be rendered on behalf of the debtor(s) in contempts.	the filing of the petition in bankruptcy,	or agreed to be paid	d to me, for services re			
	For legal services, I have agreed to accept		\$	2,300.00			
	Prior to the filing of this statement I have re	eceived	\$	2,300.00			
	Balance Due		\$	0.00			
2.	The source of the compensation paid to me was:						
	■ Debtor □ Other (specify):						
3.	The source of compensation to be paid to me is:						
	■ Debtor □ Other (specify):						
4.	■ I have not agreed to share the above-disclose	ed compensation with any other person	unless they are men	nbers and associates of	my law firm.		
	☐ I have agreed to share the above-disclosed cocopy of the agreement, together with a list of				w firm. A		
5.	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:						
	 a. Analysis of the debtor's financial situation, at b. Preparation and filing of any petition, schedu c. Representation of the debtor at the meeting of d. [Other provisions as needed] Negotiations with secured creditor reaffirmation agreements and app 522(f)(2)(A) for avoidance of liens 	ales, statement of affairs and plan which of creditors and confirmation hearing, an ors to reduce to market value; exe polications as needed; preparation	may be required; d any adjourned he	arings thereof;	iling of		
6.	By agreement with the debtor(s), the above-discless Adversary proceedings.	losed fee does not include the following	service:				
		CERTIFICATION					
this	I certify that the foregoing is a complete stateme s bankruptcy proceeding.	nt of any agreement or arrangement for	payment to me for	representation of the de	ebtor(s) in		
	August 29, 2017	/s/ Patrick A. Mes	zaros				
_	Date	Patrick A. Meszar					
		Signature of Attorne Law Office of Pat					
		1100 W. Jeffersor					
		Joliet, IL 60435					
		815-722-4001 Fa					
		_patrickmeszaros@	@yahoo.com				

Name of law firm

United States Bankruptcy Court Northern District of Illinois

In re	Debra A Podzimek		Case No.	
		Debtor(s)	Chapter	13
	VE	CRIFICATION OF CREDITOR MAT	ΓRIX	
		Number of Cr	reditors:	25
	The above-named Debtor(s) (our) knowledge.	hereby verifies that the list of creditors	s is true and	correct to the best of my
Date:	August 29, 2017	/s/ Debra A Podzimek Debra A Podzimek Signature of Debtor		

Capital One Bankruptcy Department P.O. Box 5155 Norcross, GA 30091

Card Services
PO Box 60517
City of Industry, CA 91716-0517

Cardmember Services PO Box 1423 Charlotte, NC 28201-1423

Citi Cards PO Box 78045 Phoenix, AZ 85062

Crepe Erase PO Box 2002 Harlan, IA 51593

Discover FIN SVCS LLC Attn: Bankruptcy Dept. PO Box 15316 Wilmington, DE 19850

Dupage Medical Group 15921 Collections Center Drive Chicago, IL 60693

Fifth Third Bank PO Box 740789 Cincinnati, OH 45274-0789

Home Depot Credit Services PO Box 78011 Phoenix, AZ 85062

Illinois Department of Revenue Bankruptcy Section Level 7-425 100 W. Randolph Street Chicago, IL 60606 IRS - Bankruptcy Notice Centralized Insolvency Operations PO Box 7346 Philadelphia, PA 19101-7346

Macy's Bankrupcy Processing PO Box 8053 Mason, OH 45040

MiraMed Revenue Group Dept 77304 PO Box 77000 Detroit, MI 48277-0304

Morris Hospital Business Office 150 West High St. Morris, IL 60450-1497

Nationwide Credit & Collection P.O. Box 3219 Oak Brook, IL 60523-8852

Neiman Marcus P.O. Box 5235 Carol Stream, IL 60197-5235

Nissan Motor Acceptance Corporation Attn: Bankruptcy 8900 Freeport Parkway Irving, TX 75063-2438

Nordstrom FSB PO Box 13589 Scottsdale, AZ 85267

Northeast Endocrinology 2222 Weber Road Joliet, IL 60435

PayPal Credit PO Box 105658 Atlanta, GA 30348-5658 PD Brown Enterprises Inc 703 Cambridge Lane Shorewood, IL 60404

PNC Bank PO Box 856177 Louisville, KY 40285-6177

PNC Mortgage PO Box 6534 Carol Stream, IL 60197-6534

SYNCHRONY Bank
ALL Bankruptcy Notices
PO Box 965061
Orlando, FL 32896-5061

Vision Financial Services PO Box 1768 La Porte, IN 46352-1768